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<b>POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>		Application Number	09/032,450-Conf.#9951
		Filing Date	February 27, 1998
		First Named Inventor	Gutkowicz-Krusin, Dina
		Title	Systems and Methods for the Multispectral Imaging and Characterization of Skin Tissue
		Art Unit	2623
		Examiner Name	Dastouri, Mehrdad
		Attorney Docket No.	EOS-010

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.

OR

 I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

051414

OR

 I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number	Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

 The address associated with the above-mentioned Customer Number:

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OR

 Firm or Individual Name

Address			
City	State	Zip	
Country	Telephone	Email	

I am the:

 Applicant/Inventor.

OR

 Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_

## SIGNATURE of Applicant or Assignee of Record

Signature	<i>Joseph V. Gutkowicz</i>	Date	Decease 7, 2011
Name	<i>Joseph V. Gutkowicz</i>	Telephone	(914) 400-6724
Title and Company	MECA Sciences, Inc.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of 1 forms are submitted.